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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *new, JF*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *new, JF*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OH	SHEETS DRAWING 3	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>[Signature]</i> <i>[Initials]</i>				

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## TITLE

Sanitary napkin for dynamic body fit

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